



# K A N S A S

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## Smallpox Q&A

The last known naturally occurring case of smallpox occurred in Somalia in 1977. In May 1980, the World Health Assembly certified that the world was free of naturally occurring smallpox. In 1983, vaccine distribution to the civilian population was discontinued.

In the unlikely event of a biological attack involving smallpox, the CDC has clear guidelines to swiftly provide vaccine to people exposed to this disease. The vaccine is securely stored in several locations throughout the U.S.

The majority of patients with smallpox would recover. In the past, death occurred in 20 to 40 percent of cases. It is believed this rate would be lower with modern treatment methods.

### **How is smallpox spread?**

Infected saliva droplets spread smallpox from person to person. People with smallpox are most infectious during the first week of illness, when the largest amount of virus is present in saliva. However, some risk of transmission lasts until all scabs have fallen off.

Skin contact of a smallpox lesion or scab can spread the disease, if skin integrity is not intact such as: cuts, abrasions, etc.

Contaminated clothing or bed linen could also spread the virus. Special precautions need to be taken to ensure that all bedding and clothing of patients are cleaned appropriately with bleach and hot water. Disinfectants such as bleach and quaternary ammonia can be used for cleaning contaminated surfaces.

### **If someone were exposed to smallpox, when and how would symptoms show?**

Symptoms begin to show from 7 to 17 days following exposure. Initial symptoms include high fever, fatigue, and head and back aches. A rash, most prominent on the face, arms, and legs, follows in 2 to 3 days. The rash starts with flat red lesions that evolve at the same rate. Lesions become pus-filled after a few days and then begin to crust early in the second week. Scabs develop and then separate and fall off after about 3-4 weeks.

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## **Is vaccination recommended?**

The CDC does not currently recommend vaccination for the public. In the absence of a confirmed case of smallpox anywhere in the world, there is no need to be vaccinated. There can also be severe side effects to the smallpox vaccine. However, vaccination is offered to certain health care and public health workers. The federal government has authorized a program to vaccinate in order to improve national preparedness.

For people exposed to smallpox, the vaccine can lessen the severity or even prevent illness if it is given within 4 days after exposure. The vaccine does not contain the smallpox virus

Smallpox vaccine should not be administered to persons with eczema or other skin conditions, pregnant women, or people with weakened immune systems.

## **If I was vaccinated against smallpox in 1972 or earlier, am I immune?**

Approximately half of the U.S. population received smallpox vaccine before routine vaccination ended in 1972. The level of immunity, if any, among these persons is uncertain; therefore, they are assumed to be susceptible.

## **How would the public health system respond to a smallpox outbreak?**

Resources would be immediately mobilized at the federal, state, and local levels. People with confirmed cases of smallpox would be placed in medical isolation while they receive treatment. Household members, friends, associates, and co-workers of people with smallpox would be vaccinated as soon as possible. This is the same approach used to wipe out the disease in the 1970s.

Although a biological attack using the smallpox virus is very unlikely, all possibilities are being considered following the events of September 11, 2001 and the subsequent anthrax mailings. Health care providers have been notified to watch for and report any suspicious cases of disease that closely resemble smallpox.